**REQUEST FOR REIMBURSEMENT**

Type of Improvement: Façade Landscaping

Today’s Date:       (mm/dd/yyyy)

Legal Business Name: Click or tap here to enter text.

Contact Name: Click or tap here to enter text.

Trade Name (DBA) if different from Legal Name: Click or tap here to enter text.

State Where the Business is Registered/Organized: Click or tap here to enter text.

VA State Corp. Commission number, if applicable: Click or tap here to enter text.

Physical Business Address (no PO Box): Click or tap here to enter text.

Mailing Address: Click or tap here to enter text.

Contact Phone Number: Click or tap here to enter text. Contact E-mail Address: Click or tap here to enter text.

Date Project Completed: Click or tap here to enter text. Total Project Cost: Click or tap here to enter text.

Please submit the following documents with the request form, paper copies can be attached or electronic copies ***(preferred)*** emailed to [IncentiveCompliance@ci.waynesboro.va.us](mailto:IncentiveCompliance@ci.waynesboro.va.us) with “Reimbursement Request” in the subject line:

|  |  |  |
| --- | --- | --- |
|  | **Attached** | **Submitted via email** |
| Completed IRS W-9 |  |  |
| Paid Invoices/Receipts |  |  |
| Photos of Completed Work |  |  |

Reimbursement Process

* Requests must be received by the end of the month to be reviewed and approved at the next regular EDA meeting, held on the 2nd Friday of each month
* Façade grant is 50% of the total project cost, with a maximum of $5,000, and the landscape grant 50% up to $4,000
* Only complete reimbursement request forms with all attachments will be considered
* When approved, checks will be made payable to the legal business name above and mailed to the mailing address above within one week of the EDA meeting